

Testimony

Senate Bill 2189

Senate Human Services Committee

Monday, January 17, 2005; 9 a.m.

North Dakota Department of Health

Good morning, Chairman Lee and members of the Senate Human Services Committee. My name is Larry Shireley, and I am director of the Division of Disease Control for the North Dakota Department of Health. I am here today to testify in support of Senate Bill 2189.

Immunizations are one of the most effective public health preventive measures, and I am pleased to say that through the collaborative efforts of the state's public and private health providers, North Dakota has one of the highest childhood immunization rates in the nation.

North Dakota law requires certain immunizations for children in day-care facilities and schools. Medical facilities also require that their staff receive certain immunizations for protection of both staff and patients. The North Dakota Department of Health maintains the North Dakota Immunization Information System, an immunization registry that contains the immunization histories of more than 400,000 people. Health-care providers also maintain immunization information for their patients and staff.

It is important not only that people are immunized, but also that they receive their immunizations according to prescribed schedules and recommendations. Unavailable immunization information can result in people receiving unnecessary immunizations, which also can lead to serious side effects. Currently, the law prohibits sharing of immunization information among health-care providers and agencies that have a need to know unless the person explicitly consents.

The North Dakota Department of Health and health-care providers frequently receive requests for a person's immunization history from child-care facilities, schools, public health agencies and health-care providers. The current consent requirement is inconvenient for the requestor and can result in exclusion of children from school or child care because of the delay in obtaining immunization information.

Health-care providers have expressed their frustration at not being able to receive or provide necessary, prompt immunization information because of the current requirement of having the patient's verbal or written consent. In fact, the change to current law was introduced at the request of one of North Dakota's leading medical centers.

All of us involved in health care recognize the need to maintain confidentiality of sensitive health information, which is reinforced by guidelines and requirements under HIPAA privacy rules. The legislation continues to limit the information to be released to only the dates and types of immunizations.

Removing the portion of the current law requiring verbal or written consent for release of immunization information will help ensure that people receive prompt, efficient and necessary medical care and that immunization information can be provided expediently when necessary to those who have a need to know.

This concludes my testimony. I am happy to answer any questions you may have.